



**DIVISION OF PERMITTING AND DEVELOPMENT REVIEW  
DEPARTMENT OF PERMITS AND INSPECTIONS  
FREDERICK COUNTY, MARYLAND**

30 North Market Street • Frederick, Maryland 21701

Phone (301) 600-2313 • Fax (301) 600-2309 • TTY: Use Maryland Relay Service

**OFFICE USE ONLY:**

(2011 PERMIT NUMBER ASSIGNED)

**2011 GAMING PERMIT APPLICATION FOR CURRENT PERMIT HOLDERS**

**All 2010 Gaming Permits expire on December 31, 2010 (or before, according to expiration date of permit).**

**No Gaming Permit can be used for other than the year of issue. A separate application form is required for each category of Gaming Permit. Please note that incomplete forms will be returned!**

**ORGANIZATION INFORMATION**

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
P.O. Box # \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Fax Number \_\_\_\_\_

**BAR OR TAVERN INFORMATION (if applicable)**

Company Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
P.O. Box # \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Food Licensed # \_\_\_\_\_ Liquor License # \_\_\_\_\_

**ORG REPRESENTATIVE INDIVIDUAL INFORMATION\***

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
P.O. Box \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Cell Number \_\_\_\_\_

**BAR OR TAVERN REPRESENTATIVE INDIVIDUAL INFORMATION\***

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
P. O Box \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Cell Number \_\_\_\_\_

*\*Each designated responsible person for this gaming permit must sign an affidavit (see reverse side of this form). Each responsible person will need to supply a copy of his or her driver's license. If more than one person is responsible, enclose an affidavit and a copy of driver's license for each person. You may copy the reverse side of this form for those additional persons.*

**CHECK ONLY **ONE** CATEGORY PER APPLICATION FORM:**

<b>Tip Jar/Punchboard:</b> _____ \$ 181.00 (on premise) _____ \$ 820.00 (off-premise yearly) _____ \$ 121.00 Carnival _____ \$ 205.00 *(3-month off-premise) * List which 3 months _____ _____ \$ 82.00 *(single occurrence) *Date of single occurrence _____	<b>Raffle:</b> _____ \$ 55.00  <b>Gaming:</b> _____ \$ 55.00  <b>Bingo:</b> _____ \$ 55.00  <b>Fire Dept:</b> _____ \$ 110.00
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2010 or most recent Gaming Permit # \_\_\_\_\_ Please make checks payable to: "Frederick County".

**IMPORTANT: THE REVERSE SIDE OF THIS APPLICATION FORM MUST BE COMPLETED (AFFIDAVIT)!** The processing time averages 15-20 working days due to the heavy volume of incoming applications, so please plan accordingly. To ensure that you receive your 2011 permit by January 1<sup>st</sup>, application must be received in the Permits office no later than December 15<sup>th</sup>. Your organization may not conduct gaming after December 31, 2010 if your 2010 permit expires and the 2011 permit has not been approved! No gaming permit will be approved if there are outstanding gaming violations.

**OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_

## REQUIRED AFFIDAVIT

The affidavit(s) below must be signed by all parties who are directly responsible for this gaming permit. If this is for an off-premise tip jar permit, both the organization *and* operator affidavits are required.

**A copy of each responsible person's driver's license must be attached, regardless if one was submitted for a previous year.**

NOTE: Only the individual(s) directly responsible for the gaming permit who have signed the required affidavit are allowed to sign gaming reports required by Frederick County.

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### **AFFIDAVIT TO BE SIGNED BY THE ORGANIZATION REPRESENTATIVE(S):**

By signing below, I, \_\_\_\_\_, solemnly affirm under the penalties of perjury, that I have never been convicted of a felony, nor have I been convicted within the past five (5) years of a misdemeanor related in any way to gaming or gambling. I understand that this information will be verified by a representative of the Frederick County Sheriffs' Office and do give my permission for this verification. I also understand that I will be taking responsibility for complying with the provisions of the Gaming Ordinance. This may include, but is not limited to, monthly tip jar/punchboard reports, and/or annual raffle reports.

**NOTARY SEAL**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
Home address

\_\_\_\_\_  
Town/State/Zip Code

\_\_\_\_\_  
Home Phone #

\_\_\_\_\_  
**Printed Name**

By: \_\_\_\_\_

Notary Public

**My Commission Expires** \_\_\_\_\_

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### **FOR OFF-PREMISE TIP JAR/PUNCHBOARD PERMITS: The Operator must sign this affidavit:**

By signing below, I, \_\_\_\_\_, solemnly affirm under the penalties of perjury, that I have never been convicted of a felony, nor have I been convicted within the past five (5) years of a misdemeanor related in any way to gaming or gambling. I understand that this information will be verified by a representative of the Frederick County Sheriffs' Office and do give my permission for this verification. I also understand that I will be taking responsibility for complying with the provisions of the Gaming Ordinance. This may include, but is not limited to, monthly tip jar/punchboard reports, and/or annual raffle reports.

**NOTARY SEAL**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
Home address

\_\_\_\_\_  
Town/State/Zip Code

\_\_\_\_\_  
Home Phone#

\_\_\_\_\_  
**Printed Name**

By: \_\_\_\_\_

Notary Public

**My Commission Expires** \_\_\_\_\_